

PUBLIC PROTECTION CABINET  
Department of Insurance  
Division of Health and Life Insurance and Managed Care  
(As Amended at ARRS, April 13, 2021)

**806 KAR 40:020. Charitable health care provider registration.**

RELATES TO: KRS 216.941, 304.40-075

STATUTORY AUTHORITY: KRS 304.2-110(1), 304.40-075(3)(b), (6)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 304.2-110(1) authorizes the Commissioner of Insurance to promulgate administrative regulations necessary for or as an aid to the effectuation of any provision of the Kentucky Insurance Code [as defined in] ~~authorizes the Executive Director of the Office of Insurance to promulgate administrative regulations necessary for or as an aid to the effectuation of any provision of ]~~ ~~[KRS 304.1-010]~~ ~~[304.010]~~ ~~[through 304.99-154]~~ ~~[304.99-152]~~. KRS 304.40-075(3)(b) ~~requires~~ authorizes ~~[requires]~~ the department to promulgate administrative regulations to establish reasonable guidelines for the registration of charitable health care providers. KRS 304.40-075(6) requires the department to determine if the profits made for medical professional liability insurance risks covered by that section are consistent with reasonable loss ratio guidelines. This [As established in KRS 304.40-075, the] ~~[This]~~ ~~[function of this]~~ administrative regulation establishes [is to establish] ~~[establishes]~~ guidelines for the registration of charitable health care providers who seek [wish] to obtain reimbursement of paid premium [premiums paid] for medical professional liability insurance, and also establishes reporting requirements for medical professional liability insurers for the purpose of determining reasonable loss ratios. ~~[Pursuant to KRS 304.40-075, the office is required to establish guidelines for the registration of charitable health care providers who wish to obtain reimbursement of premiums paid for medical professional liability insurance. This administrative regulation will implement that requirement.]~~

Section 1. To request reimbursement of paid premium for medical professional liability insurance, a charitable health care provider shall supply to the Department of Insurance the following information ~~[to the Department [Office] of Insurance in order to request reimbursement of paid premium for medical professional liability insurance]:~~

- (1) The name [Name] and address of the provider;
- (2) The license [License] number of the provider;
- (3) The source [Source] of funding for the provider of charitable health care service;
- (4) The number [Number] of employees who render medical care without compensation or charge and without expectation of compensation or charge and who shall [will] be covered under the medical professional liability insurance [malpractice coverage];
- (5) The expected number of patients who [that] may [to] be provided charitable health care services in the year for which the insurer offers [will offer] malpractice coverage;
- (6) The health [Health] services provided by the charitable health care provider;
- (7) The following information [Information] regarding the provider's medical professional liability insurance policy for which reimbursement is being requested:
  - (a) A copy [Copy] of the entire policy, including the declarations page showing:
    1. The name and address of the insurer [Insurer's name and address];
    2. The effective date of the policy [Policy effective dates];
    3. The policy [Policy] number;
    4. The total amount of premium [Premium] due; and

(b) The itemized [Itemized] billing and proof of payment of the requested reimbursement amount [being requested to be reimbursed];

(8) A copy [Copy] of the registration filed with the Cabinet for Health and Family Services under [established by] under] KRS 216.941; and

(9) Acknowledgment that the provider will follow the [insurer's] risk management and loss prevention policies and procedures established by the insurer.

Section 2. If any of the information provided in Section 1 of this administrative regulation changes or is incorrect, the charitable health care provider shall provide the correct information immediately to the Department of Insurance [office].

Section 3. Any premium refund received by the charitable health care provider and remitted to the Department [Office] of Insurance, pursuant to KRS 304.40-075(3)(d), shall be accompanied by the following:

- (1) A copy of the previous request;
- (2) An explanation of the events prompting the refund; and
- (3) Copies of all documents from the insurer regarding the refund and its amount.

Section 4. (1) An insurer who [that/which] offers medical professional liability insurance shall provide information regarding the premium [premiums] paid, any expenses incurred by the insurer, and the profits [profits] made for all risk covered pursuant to KRS 304.40-075. The information required by Section 1 of this administrative regulation shall be provided to the Department of Insurance [office] by March 1 and shall include premium, expense, and profit information from the preceding calendar year and shall be submitted on Form CHP-2B P&C [07-2000].

(2) [In order] For the department [office] to determine reasonable loss ratio guidelines, upon request by the department [office], an insurer who [that/which] offers medical professional liability insurance shall provide premium, profit, and expense information related to the entirety of the [all of its] medical professional liability insurance business of the insurer.

Section 5. Incorporation by Reference. (1) The following material is incorporated by reference:

(a) Form CHP-2A P&C [07-2000], "Commonwealth of Kentucky Department [Office] of Insurance Property and Casualty Division Medical Professional Liability Insurance Annual Call for Data Instructions", 11/2020 edition; and

(b) Form CHP-2B P&C [07-2000], "Commonwealth of Kentucky Department [Office] of Insurance Property and Casualty Division Liability Insurance Annual Call for Data", 11/2020 edition.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, from the Department [Office] of Insurance, Mayo-Underwood Building, 500 Mero Street [245 West Main Street], Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. This material is also available on the office's Web site at [www.insurance.ky.gov \[http://doi.ppr.ky.gov/kentucky/\]](http://doi.ppr.ky.gov/kentucky/).

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